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FROM:	PHONE NO.:	E-MAIL ADDRESS:
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RE:	Application No.	09/660,435
	Applicant:	Michael G. West
	Filed:	09/08/00
	TC/A.U.	2614
	Examiner:	John W. Miller
	Docket No:	107773-132329

ATTACHMENT(S):

- Transmittal Summary
- Drawings (annotated and amended)
- Written Consent of Assignee

FILE NUMBER:	107773-132329		
NO. OF PAGES, INCLUDING COVER:	10	TRANSMITTAL TIME:	11:32 a.m. / p.m.
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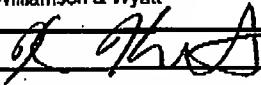
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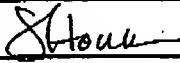
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/660,435
		Filing Date	09/08/00
		First Named Inventor	Michael G. West
		Art Unit	2614
		Examiner Name	MILLER, JOHN W.
Total Number of Pages in This Submission	9	Attorney Docket Number	107773-132329

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Written Consent of Assignee
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or individual name	Jason K. Klindworth Schwabe Williamson & Wyatt
Signature	
Date	02/13/04

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Signature		Date 02/13/04

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J. Douglas
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Attorney's Docket No.: 107773-132329

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Reissue Application for:

Michael G. West

Application No.: 09/660,435

Filed: 09/08/2000

For: METHOD AND APPARATUS FOR
 AUTOMATIC PIXEL CLOCK PHASE
 AND FREQUENCY CORRECTION
 IN ANALOG TO DIGITAL VIDEO
 SIGNAL CONVERSION

Examiner: MILLER, JOHN W Technology Center 2600

Art Group: 2614

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TRANSMITTAL SUMMARY

In light of previously undetected formalistic deficiencies and pursuant to Examiner's request, enclosed for filing in the above-referenced reissue application are the following:

1. Annotated sheets 1-3 showing changes to Figs. 1a, 1b, 1c, 1d, and 2;
2. Replacement sheets 1-5 for publication indicating that Figs. 1A, 1B, 1c, 1d and 2 have been amended; and
3. Written Consent of Assignee.

The Examiner is encouraged to telephone the undersigned if there are any remaining questions of patentability, and a telephone interview would be helpful in resolving these questions.

Respectfully submitted,
 SCHWABE, WILLIAMSON & WYATT, P.C.


 Jason K. Klindtworth
 Registration No. 47,211

Dated: 2/13/04
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